PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09177753

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS								=]	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	EE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS:			_23 minus 20=		• 3		X\$ 9	7	के केश्वीकर्त संस्कृतिक	OR	X\$18=	54-	
INDEPENDENT CLAIMS			/ minus 3 =				X40	=		OR	X80=		
MU	LTIPLÉ DEPEN	IDENT CLAIM P	RESENT	ESENT			+135				+270=		
* If the difference in column 1 is less than zero, enter "0" in c						olumn 2	TOTA			OR	TOTAL	e digitalisti til til Leksisti signer	
CLAIMS AS AMENDED - PART II								1. The	NTITY	OR	OTHER		
	in the second	(Column 1) CLAIMS		(Colui	nn 2) Est	(Column 3)	2 SMAI		10 32 3	UH. L	SMALL	t (E sa sa sa sa s	
A FN		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	• 23	Minus	Organis No. 6	3		x\$ 9	- X		OR	X\$18=\		
SKEIN SKEIN	Independent		Minus		3		X40			OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	CLAIM		+135				+270=	. \	
							101	AL		OR OR	TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT FEE					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH	IEST BER DUSLY	PRESENT	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş.	Total	.13	Minus	2	\$		X\$ 9			OR	X\$18=		
VME	Independent	. 2	Minus	<u>ک</u> ے)	=	X40=			OR	X80=		
	FIRST PRESE	NTATION OF MI	PENDENT	CLAIM			\dashv						
				,		•	+135: TOT			OR	+270= TOTAL		
							ADDIT. F	EEL	<u>*</u>	OH	ADDIT. FEE		
		(Column 1) CLAIMS	1	(Colur		(Column 3)				:			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO	BER DUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL	1	PLATE	ADDI- TIONAL	
	Total	. 20	Minus	** 2	2-3	=	X\$ 9=	+	FEE	00	X\$18=	FEE /	
	Independent	. 2	Minus	***	3	=		+		OR	/		
lacksquare	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		X40=			OR	X80=	\	
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=		
** If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		nber Previously Pa					r found in the	app	ropriate box	cin col	umn 1		